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	Application Number	10/614,807			
TRANSMITTAL	Filing Date	July 9, 2003 Wuwen Yi 1742			
FORM	First Named Inventor				
	Art Unit				
be used for all correspondence after initial filing)	Examiner Name	Harry D. Wilkins III			
Number of Pages in This Submission	Attorney Docket Number	H0004116-US			

ENCLOSURES (Check all that apply)											
~	Fee Trans	mittal Fo	orm		Drawing(s)				Allowance Communication to TC		
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	Extension Express A	ter Final fidavits/d of Time bandonr n Disclos	eclaration(s) Request nent Request sure Statement		Petition Petition to Convert to Provisional Applicatio Power of Attorney, Re Change of Correspon Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table	n evocation dence Address	Che	(Appea Propri Status Other below eturn Pock for \$1	stcard Receipts		
Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			L	narks mer No. 021567							
			SIGNA	TURE	OF APPLICANT,	ATTORNEY, C	R AG	ENT			
Firm Name Wells St. John P.S.						-					
Signat	ure	()e	nuly	<u></u>	Taylor						
	Jannifer J. Taylor, Ph.D.										
Date March 7			2006 Reg. No.			48,711					
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Complete if Known pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/614,807 Application Number **TRANSMITTA** Filing Date July 9, 2003 For FY 2006 First Named Inventor Wuwen Yi **Examiner Name** Harry D. Wilkins III Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1742 TOTAL AMOUNT OF PAYMENT 180.00 H0004116-US Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: Wells St. John P.S. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity Small Entity** Fees Paid (\$) Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee Description Fee (\$) Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims** Multiple Dependent Claims **Extra Claims** Fee Paid (\$) Fee (\$) - 20 or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. **APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Total Sheets Extra Sheets __ (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Supplemental Information Disclosure Statement 180. SUBMITTED BY

Signature Registration No. (Attorney/Agent) 48,711 Telephone (509) 624-4276

Name (Print/Type) Jennifer J Taylor, Ph/D. Date March 7 2006

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